

Highlights for LPCs:

Ziegler and LeadingAge Release the 19th Annual LZ200. The 2022 edition of the LZ200 is now available for [download](#); this sentinel report represents the largest 200 multi-site NFP aging services providers, the largest 150 single site providers, and the largest NFP sponsors of multi-site affordable housing. Here are a few highlights; Ziegler offers a summary in their most recent [newsletter](#) as well. National Senior Campuses retained its #1 spot on the list for the seventh consecutive year; Pennsylvania is home to five of the top 25 providers' parent companies and is home to 27 providers' headquarters for the entire LZ200, the most of any state. Forty-three percent (43%) of the LZ200 providers are Life Plan Communities, the largest grouping of all provider types; thirty-one percent (31%) provide affordable housing for seniors and 30% manage one or more senior living communities on behalf of another organization. Consistent with recent prior years, growth in the LZ200 organizations was characterized primarily by affiliations, acquisitions and existing campus expansions. Again this year, the LZ200 took a look at the composition of assisted living and skilled nursing units across the largest providers; over the last seven years, LZ200 providers have been moving towards more private SNF units as well as private AL units. As the larger LZ200 providers tended to show more of an involvement in memory support care and in some form of HCBS service; at least 10% of LZ200 providers are now offering continuing care at home.

LPC October Member Network Materials Available. For a recap of this meeting's excellent discussion on preparing for the solo ager, or ICYMI, here are the [recording](#) and [slides](#), which include embedded resources from our panelists. Save the date: Thursday, November 17 at 2:00 PM ET is our next meeting, where we will discuss the "consumer voice."

LeadingAge Voting Resources. Yesterday was National Voter Registration Day - an important reminder that having a plan to vote is really important for this upcoming election. Coming out of the pandemic, many states are once again changing the way that citizens can vote in their communities. Some are expanding opportunities to vote and unfortunately some states are limiting options. LeadingAge has been passionate about ensuring that older adults have access to voting and the ability to register to vote. We have created an easy to use [website](#), that will allow anyone to look up their registration status, register to vote, request a mail-in ballot, find their polling place and even look up local candidates. Please share this tool with members and help ensure that everyone has a plan for how they are going to vote this election.

Medical / COVID-19 Related Updates:

LeadingAge Meeting with White House COVID Team. LeadingAge policy staff met with the White House COVID team on November 1. The COVID team has asked LeadingAge and other organizations to work with them on promoting vaccines and boosters, use of treatments, and efforts to improve air quality. In kicking off the meeting, Dr. Ashish Jha, head of the COVID team, told the small group assembled that over the next five months (November through March) infectious disease experts estimate that 50,000 people in the country will die of COVID. One of every five of these individuals who die- 20% - will be nursing home residents. "All or most of these deaths are preventable with the proper use of vaccines,

boosters and treatments,” Jha observed. “We can save ourselves and potentially prevent 50,000 deaths.” Nursing home and assisted living providers play an important role in encouraging the use of these measures and Dr. Jha asserted that the White House has a strong commitment to partnering with aging services providers to prevent this dire outcome. Watch for an article on the meeting tomorrow.

White House Push on Boosters, Treatments, and Air Quality to Prevent as Many COVID Deaths as Possible. As promised yesterday, [here](#) is an article with more details about the meeting. LeadingAge and a few other organizations attended with the White House COVID team on November 1. As noted last night, the COVID team has asked LeadingAge and other organizations to work with them on promoting vaccines and boosters, use of treatments, and efforts to improve air quality. In kicking off the meeting, Dr. Ashish Jha, head of the COVID team, told the small group assembled that over the next five months (November through March) infectious disease experts estimate that 50,000 people in the country will die of COVID. One of every five of these individuals who die- 20% - will be nursing home residents. “All or most of these deaths are preventable with the proper use of vaccines, boosters and treatments,” Jha observed. “We can save ourselves and potentially prevent 50,000 deaths.” Nursing home and assisted living providers play an important role in encouraging the use of these measures and Dr. Jha asserted that the White House has a strong commitment to partnering with aging services providers to prevent this dire outcome.

FROM CDC/HHS:

- 1. Racial and Ethnic Disparities in Outpatient Treatment of COVID-19:** CDC [published an MMWR](#) on racial and ethnic disparities in outpatient treatment of COVID-19 in the United States from January to July, 2022. Outpatient medications are effective at preventing severe COVID-19 and are important to pandemic mitigation. Paxlovid is the most commonly prescribed medication and the preferred outpatient therapeutic for eligible patients. Racial and ethnic disparities persisted in outpatient COVID-19 treatment through July 2022. During April–July 2022, the percentage of COVID-19 patients aged ≥20 years treated with Paxlovid was 36% and 30% lower among Black and Hispanic patients than among White and non-Hispanic patients, respectively. These disparities existed among all age groups and patients with immunocompromise. Expansion of programs to increase awareness of and access to available outpatient COVID-19 treatments can help protect persons at high risk for severe illness and facilitate equitable health outcomes.
- 2. Notes From the Field: Dispensing of Oral Antiviral Drugs for Treatment of COVID-19 by Zip Code–Level Social Vulnerability:** CDC [published an MMWR](#) on dispensing of oral antiviral drugs for treatment of COVID-19 by zip code–level social vulnerability in the United States from December 23, 2021 to August 28, 2022. Equitable access to COVID-19 therapeutics is a critical aspect of the distribution program led by the U.S. Department of Health and Human Services (HHS). Two oral antiviral products, nirmatrelvir/ritonavir (Paxlovid) and molnupiravir (Lagevrio), received emergency use authorization (EUA) from the Food and Drug Administration (FDA) in December 2021, to reduce the risk for COVID-19–associated hospitalization and death for those patients with mild to moderate COVID-19 who are at higher risk for severe illness. HHS has been distributing these medications at no cost to recipients since their authorization. Data collected from provider sites during December 23, 2021 to May 21, 2022, indicated substantial disparities in the population-adjusted dispensing rates in high social vulnerability (high-vulnerability) zip codes compared with those in medium- and low-vulnerability zip codes. Specifically, dispensing rates for the 4-week period during April 24 to May 21, 2022, were 122 per 100,000 residents (19% of overall population-adjusted dispensing rates) in high-vulnerability zip codes compared with 247 (42%) in medium-vulnerability and 274 (39%) in

low-vulnerability zip codes. This report provides an updated analysis of dispensing rates by zip code–level social vulnerability and highlights important intervention strategies.

- 3. COVID-19’s Lasting Impact on the Body:** NIH [released a news story](#) on COVID-19’s lasting impact on the body. Researchers at the NIH Clinical Center, the National Institute of Dental and Craniofacial Research (NIDCR), and the National Institute of Allergy and Infectious Diseases (NIAID) performed autopsies on the bodies of patients with COVID-19. The researchers found that even in patients who had mild or asymptomatic cases of COVID-19, evidence of SARS-CoV-2 infection was present throughout the entire body and stayed there until the patients’ deaths, which in some cases occurred more than seven months after the start of symptoms. The researchers examined tissue from many different sites in the body from 44 patients who had died of COVID-19 or who had tested positive for the disease before they died. The autopsies were performed at the NIH Clinical Center between April 2020 and March 2021. Analysis of the patients’ samples revealed SARS-CoV-2 in almost every organ and organ system of their bodies, including their skin, eyes, stomachs, muscle, fat, glands, and six different parts of their brains. SARS-CoV-2 was present even in asymptomatic patients, patients who had had mild cases of COVID-19, and patients who had first been diagnosed with the disease months before their death. This suggests that even mild cases of COVID-19 spread quickly and the virus can remain in our tissue for a long time.

Advocacy Updates and Hill News:

New Venezuelan Migration Process Expands Pathways to Citizenship and Employment Opportunities.

On October 12, the Department of Homeland Security (DHS) [announced](#) actions to reduce the number of people arriving at the U.S. Southwest border, and create a more orderly and safe process for people fleeing the humanitarian and economic crisis in Venezuela. Last week, LeadingAge participated in a USCIS briefing regarding the new Venezuelan migration program, and it was noted that no data is currently available regarding the professional training, experience, qualifications, or job interests of Venezuelans who might be included in this new group. However, if organizations are willing to provide financial support for the duration of their parole in the United States, along with the recommended commitment, this may potentially lead to employment opportunities among these individuals who generally will be paroled into the United States for a period of up to 2 years. A LeadingAge article is available [here](#) that provides additional information regarding the process.

DHS to Supplement H-2B Cap with Nearly 65,000 Additional Visas for Fiscal Year 2023. The Biden Administration also [announced](#) on October 12, they will make available to employers nearly 65,000 supplemental H-2B temporary nonagricultural worker visas for fiscal year (FY) 2023, on top of the 66,000 that are normally available each year.

The H-2B visa provides for the temporary admission of foreign workers to the United States if unemployed U.S. workers cannot be found. H-2B workers are not limited to a particular set of occupations. In recent years H-2B worker have performed a number of jobs. The top positions include maids and housekeeping cleaners, amusement and recreation attendants and meat, poultry and fish cutters and trimmers. [Note: these are the DoL categories.] Foreign medical graduates coming to perform medical services are explicitly excluded have been excluded from the H-2B visas.

LeadingAge is working to expand the H-2 visa program as spelled out in our “H-2Age” bill. The draft bill would create a new temporary aging services worker visa category. Additionally, LeadingAge is

supporting the Essential Workers for Economic Advancement Act (H.R. 7239), that expands the H-2 visa program, and allows foreign workers to come to the United States to fill “essential jobs” that don’t require a college degree. This information is also available [here](#) in a LeadingAge article.

Coalition letter urges Congress to approve higher domestic and international spending levels. On November 1, LeadingAge joined a coalition of more than 400 national, state, and local organizations urging Congress to enact an omnibus government funding bill that includes domestic and international program amounts that are no less than those proposed by the House of Representatives for Fiscal Year 2023. Domestic and international programs -- also known as non-defense discretionary spending, or NDD – proposed by the House of Representatives are higher than amounts proposed by the Senate. As House and Senate appropriators work to set 2023 spending levels, LeadingAge is working with its coalition partners to advocate for the strongest possible program funding that supports older adults and their families. [You can read the coalition letter here.](#)

National Governor’s Association, “Addressing Wages of the Direct Care Workforce Through Medicaid Policies” paper: This [paper](#), released Nov. 1, examines Medicaid policy vehicles states can use to increase direct care worker wages. It provides examples of what some states are doing. For members and our state partners, it offers a list of options states may be considering to address direct care workforce challenges and ideas for how to approach Medicaid rate discussions with your states and/or potential initiatives to look out for.

News from LeadingAge:

Have You Seen the New Workforce Recruitment Tools? Backed by recent national research among potential employees, LeadingAge prepared new workforce recruitment tools. LeadingAge members can access communications strategies, message frames, messenger guidance, and tips for crafting recruitment communications. These tools are part of the expanded [Opening Doors to Aging Services](#) initiative to increase awareness of the sector and move perceptions positively. Now specific insights about connecting with potential employees are available through [Opening Doors to the Aging Services Workforce](#). These new resources are free to members. Access them now on the *new* [LeadingAge website!](#)

Start Planning Your 2023 Annual Meeting Sessions. Save the date! Proposals for the [2023 LeadingAge Call for Sessions](#) must be submitted by December 5, 2022. Submit your original session idea for the opportunity to speak at the 2023 LeadingAge Annual Meeting + EXPO in Chicago, IL from November 5-8, 2023. [Learn more and submit your proposal here.](#)

Career Ladders and Lattices: Grow the Aging Services Workforce. Aging services thought leaders from LeadingAge and partners discussed the importance of aging services providers to develop career ladders and lattices for their workforce. [Watch the event recording](#) as the panel discusses practical ways to build formal advancement opportunities and support the personal and professional goals of your individual staff members.

